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SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 2nd AMENDMENT AFTER 1st AMENDMENT IND. IND. DEP. IND. DEP. IND. DEP. t ŧ) -36. TOTAL IND. į TOTAL IND. **_** TOTAL DEP. TOTAL DEP.

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

TOTAL

FORM PTO-2022 (1-98)

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